## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

pplication or Docket Number

US010117

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			11		Mary State Control of the state		ľ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			// minus 20= *		* 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			∠/ minus 3 = *					X40=		OR	X80=	80
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	790
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	1 4 4 2 4 4	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 29	Minus	** 2	$U_{i}$	=		X\$ 9=		OR	X\$18=	
	Independent	* 4 NTATION OF M	Minus	***	T CLAIM			X40=		OR	X80=	
	FINOT PRESE	NIATION OF IM	OLTIFIC DEF	ENDEN	CLANV		J	+135=		OR	+270=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	<b>_</b>			_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 21	Minus	** 2	0	= /	╽╽	X\$ 9=		OR	X\$18=	18
	Independent FIRST PRESE	• <u>5</u>	Minus	***	1	=	4 [	X40=		OR	X80=	860
_	FIRST PRESE	VIATION OF M	OLTIPLE DEP	EINDEIN	CLAIM		┛┃	+135=		OR	+270=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	1040
(	8/9/04	(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT &		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOM	Total	· 21	Minus	** 4	1	=	] [	X\$ 9=		OR	X\$18=	
AME	Independent	• 5	Minus	***	21		<b> </b>	X40=		OR	X80=	
L_	FIRST PRESE	NTATION OF M	ULTIPLE DEF	'ENDEN	1 CLAIM		┛┞	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												